

PHA 5-Year and Annual Plan	U.S. Department of Housing and Urban Development Office of Public and Indian Housing	OMB No. 2577-0226 Expires 4/30/2011
-----------------------------------	---	--

1.0	PHA Information PHA Name: <u>Housing Authority of Hartsville</u> PHA Code: <u>SC029</u> PHA Type: <input checked="" type="checkbox"/> Small <input type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>10/2011</u>												
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>100</u> Number of HCV units: <u>210</u>												
3.0	Submission Type <input checked="" type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only												
4.0	PHA Consortia <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)												
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program <table border="1"> <tr> <th>PH</th> <th>HCV</th> </tr> <tr> <td></td> <td></td> </tr> <tr> <td></td> <td></td> </tr> <tr> <td></td> <td></td> </tr> </table>	PH	HCV						
PH	HCV												
	PHA 1:												
	PHA 2:												
	PHA 3:												
5.0	5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update.												
5.1	Mission. State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years: <u>To promote adequate and affordable housing. Economic self-sufficiency and a well maintained environment that is safe and secure.</u>												

5.2

Goals and Objectives. Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan.

Goal: Continue to provide quality housing and meet the needs of those who depend on the authority.

Objectives: Improve the scores for Public Housing and Section 8.

Goal: A safe and secure environment for residents.

Objectives: Involve residents in participating in different security programs.

Goal: Educate residents in the value of self improvement.

Objectives: Give the residents the opportunity to become self sufficient.

Goal: Involve residents in health awareness.

Objective(s): To become more health conscience.

Goal: Maintain the flow of the daily operation of the Authority.

Objective(s): Internal staff training program.

Goal: Educate residents in domestic violence, drug awareness, and other related concerns.

Objective: Communicate the importance of social concerns.

The Housing Authority of Hartsville continues to provide quality affordable housing while maintaining a safe and secure environment. The progress of the 2010 goals are as follows:

Goal: Provide good quality housing services daily to clients.

Objective: Score of 90+ on PHAS – did not accomplish this goal.

Score of 90+ on SEMAP – did not accomplish this goal.

Goal: Maintain a high level of professionalism among staff members.

Objective: Increase training opportunities for staff.

Results: The Executive Director was certified in PH Management.

Objective: Challenge performance and reward excellence.

Results: did not accomplish.

Goal: Create a personal image of who we serve and their dreams and aspirations.

Objective: Continue to supply media outlets successes of residents for media attention, as well as HAH accomplishments.

Results: Published in local newspaper the following: Children who made the A/B honor roll. The winners of the Resident Day Appreciation Drawing. The Good Neighbor award was recognized in the paper as well.

Goal: Promote involvement of clients in decisions affecting them.

Objective: Support resident associations and the resident advisory board.

Results: Resident Advisory Board meetings are held on frequent basis.

Objective: Strengthen communication with clients.

Results: A monthly calendar is sent to each resident giving notice of upcoming events. We have an open door policy for residents.

Goal: Provide improved living conditions for very low and low income families while maintaining their rent payments at an affordable level.

Objective: To operate a socially and financially sound public housing agency that provides decent, safe, and sanitary housing within a drug free, suitable living environment for tenants and their families.

Results: We continue to work on this objective.

Objective: To lawfully deny the admission of applicants, or the continued occupancy of residents, whose habits and practices reasonably may be expected to adversely affect the health, safety, comfort, or welfare of other residents or the physical environment of the neighborhood, or create danger to PHA employees.

Results: Continue to run background checks on future residents. Any type of criminal activity will deny an individual occupancy.

Goal: Avoid concentrations of economically and socially deprived families in the PHA'S Public Housing Development.

Objective: To attempt to house a tenant body that is composed of families with a broad range of incomes and rent paying abilities that are representative of the range of incomes of low income families in the PHA's jurisdiction.

Result: Due to the current economic conditions it is not likely to house tenants within the range of income that allows paying rent.

Objective: To provide opportunities for upward mobility for families who desire to achieve self-sufficiency.

Result: Unable to track this objective.

Objective: To facilitate the jurisdiction management of the PHA inventory and the efficient management of the PHA staff.

Result: The management of the PHA inventory and staff has improved considerably.

Objective: To ensure compliance with Title VI of the Civil Rights Act of 1964 and all other applicable Federal Laws and Regulations so the Admissions and Continued Occupancy are conducted without regard to race, color, religion, creed, sex, national origin, handicap, or familial status.

Results: The Authority continues to comply with Title VI of the Civil Rights Act of 1964.

6.0	<p>PHA Plan Update</p> <p>(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: The following revisions were made to the Administrative Plan for the HCV Program:</p> <p>1. PART III: CALCULATING FAMILY SHARE AND PHA SUBSIDY. 6-III.A. OVERVIEW OF RENT AND SUBSIDY CALCULATIONS; Minimum Rent (24 CFR 5.630) The minimum rent for this locality is \$50.00</p> <p>2. 5-II.B. DETERMINING FAMILY UNIT (VOUCHER) SIZE (24 CFR 982.402) The PHA will reference the following chart in determining the appropriate voucher size for a family: Voucher Size 1 BR: Persons in Household (minimum – Maximum 1 – 2; Voucher Size 2 Bedroom: Persons in Household (Minimum – Maximum) 3 – 4; Voucher Size 3 Bedroom: Persons in Household (Minimum – Maximum) 5 – 6; Voucher Size 4 Bedrooms: Persons in Household (Minimum – Maximum) 7– 8; Voucher Size 5 Bedrooms – Persons in Household (Minimum – Maximum) 9– 10. Exceptions for reasonable accommodation, with appropriate medical documentation, will be made on a case-by-case basis. The family must notify the PHA of a request for reasonable accommodation in writing.</p> <p>(b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions. 5-Year and Annual PHA Plan is available at the Administrative Office which is located at 1301 South 5th Street, Hartsville, South Carolina 29550.</p>
7.0	<p>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. <i>Include statements related to these programs as applicable.</i> Programs are not available at the Housing Authority of Hartsville.</p>
8.0	<p>Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable. Attached</p>
8.1	<p>Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i>, form HUD-50075.1, for each current and open CFP grant and CFFP financing. Attached</p>
8.2	<p>Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i>, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan. Attached</p>
8.3	<p>Capital Fund Financing Program (CFFP). <input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements .N/A</p>

Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.

Based on housing information from the City of Hartsville, HUD, and other available resources the primary concern is the availability and affordability. The current market is very small compared to the number of families that the categories low income, very low income, and the extremely low incomes families that need housing. Families that earn less than 30% of the area median income still remain to be affected the most.

Public Housing Needs of Families on the Waiting List.

Total # of families on waiting list: 86
 # of Families with children: 55
 # of Elderly Families: 01
 # of Families with disabilities: 07
 # of Single Family 23

of Families needing 1 BR Unit: 31
 # of Families needing 2 BR Unit: 24
 # of Families needing 3 BR Unit: 23
 # of Families needing 4 BR Unit: 07
 # of Families needing 5 BR Unit: 01

The Housing Authority of Hartsville has 100 Units.

of 1 BR: 12
 # of 2 BR: 20
 # of 3 BR: 60
 # of 4 BR: 8

Income Analysis

	Number	Percentage
Extremely Low:	17	19.77
Very Low	0	0.00
Low	69	80.23

The PHS Waiting List is Closed:

Section 8 Housing Needs of Families on the Waiting List:

Total # of Families on Waiting List: 252
 # of Families with children: 188
 # of Elderly Families: 7
 # of Families with Disabilities: 32
 # of Single Family 25

of Families needing 1 BR Housing: 50
 # of Families needing 2 BR Housing: 100
 # of Families needing 3 BR Housing: 79
 # of Families needing 4 BR Housing: 21
 # of Families needing 5 BR Housing: 2

Income Analysis

	Number	Percentage
Extremely Low	43	17.20
Very Low	0	0.00
Low	146	82.80

The HCV Waiting List is Closed:

9.0

9.1

Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. **Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.**

10.0	<p>Additional Information. Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"</p> <p>(a) The Housing Authority of Hartsville continues its ongoing efforts in meeting the goals and objectives set forth in our mission statement as well as our previous annual plan. We strive to create a safe and secure environment for our tenants. We take pride in the physical appearance of our two complexes.</p> <p>(b) A "significant amendment" and "Substantial Deviation/Modification" to the Annual Plan and Policies is defined as regulatory and elective. A change to the purpose or definition of the Housing Authority of Hartsville policies or plan would require action by the Board of Commissioners. If a change is directed by a regulatory change the PHA will follow the necessary requirements of the change and modify the affected policy.</p> <p>(d) Authority's Plan for Improvement The Authority plans to use all available resources to turn around the prior score for Public Housing as well as the HCV program. The HAH staff will work diligently in submitting SEMAP before the due date. The HCV program will implement cost saving measures that will align the program with the funding received. The PHA will investigate and implement cost reductions that will give the authority a more secure financial status.</p>
11.0	<p>Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.</p> <p>(a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights)</p> <p>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</p> <p>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</p> <p>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</p> <p>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</p> <p>(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.</p> <p>(g) Challenged Elements</p> <p>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</p> <p>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</p>


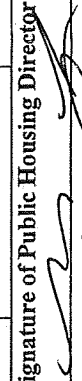
Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

Part I: Summary		Grant Type and Number Capital Fund Program Grant No: SC16P029501-10 Replacement Housing Factor Grant No: Date of CFFP: 07/15/2010		FFY of Grant: 2010 FFY of Grant Approval:	
PHA Name: Housing Authority of Hartsville					
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Original	Revised²	Obligated	Total Actual Cost¹ Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	20,000	34,942.12	34,942.12	34,942.12
3	1408 Management Improvements	8,876	11,157.83	11,157.83	11,157.83
4	1410 Administration (may not exceed 10% of line 21)	8,875	5,856.52	5,856.52	5,856.52
5	1411 Audit	600	0.00	0.00	0.00
6	1415 Liquidated Damages				
7	1430 Fees and Costs	13,983	0.00	0.00	0.00
8	1440 Site Acquisition				
9	1450 Site Improvement	10,000	2,358.94	2,358.94	2,358.94
10	1460 Dwelling Structures	92,448	120,466.59	120,466.59	120,466.59
11	1465.1 Dwelling Equipment—Nonexpendable	20,000	0.00	0.00	0.00
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary		FFY of Grant: 2010 FFY of Grant Approval:	
PHA Name: Housing Authority of Hartsville	Grant Type and Number Capital Fund Program Grant No: SC16P029501-10 Replacement Housing Factor Grant No: Date of CFFP: 07/15/2010		
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost Original	Total Actual Cost ¹ Obligated Expended
18a	1501 Collateralization or Debt Service paid by the PHA		
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment		
19	1502 Contingency (may not exceed 8% of line 20)		
20	Amount of Annual Grant: (sum of lines 2 - 19)	174,782	174,782
21	Amount of line 20 Related to LBP Activities		
22	Amount of line 20 Related to Section 504 Activities		
23	Amount of line 20 Related to Security - Soft Costs		
24	Amount of line 20 Related to Security - Hard Costs		
25	Amount of line 20 Related to Energy Conservation Measures		
Signature of Executive Director (acting)		Signature of Public Housing Director	Date
			8/11/11

Eric A. Bickley
Director
Public Housing Program Center

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RHP funds shall be included here.

Part II: Supporting Pages							Federal FFY of Grant: 2010		
PHA Name: Housing Authority of Hartsville		Grant Type and Number Capital Fund Program Grant No: SC16P029501-10 CFFP (Yes/No): Replacement Housing Factor Grant No:							
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work	
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²		
29-3 & 29-12	Routine Operations	1406		20,000	34,942.12	34,942.12	34,942.12	Complete	
29-3 & 29-12	Management Improvement	1408		8,876	11,157.83	11,157.83	11,157.83	Complete	
29-3 & 29-12	Administration	1410		8,875	5,856.52	5,854.52	5,856.52	Complete	
29-3 & 29-12	Audit	1411		600	0.00	0.00	0.00		
29-3 & 29-12	A & E Fees	1430		13,983	0.00	0.00	0.00		
29-3 & 29-12	Backfill/Topsoil	1450		2,000	2,358.94	2,358.94	2,358.94	Complete	
29-3 & 29-12	Flowers	1450		2,000	0.00	0.00	0.00		
29-3 & 29-12	Playground Equipment	1450		6,000	0.00	0.00	0.00		
29-3 & 29-12	Range Hoods	1460		20,000	0.00	0.00	0.00		
29-3	Roofs	1460		30,000	21,340	21,340	21,340	Complete	
29-3 & 29-12	Interior Wood Doors	1460		20,000	0.00	0.00	0.00		
29-3 & 29-12	Exterior Metal Doors	1460		22,448	0.00	0.00	0.00		
29-3 & 29-12	Gas Furnaces	1465		10,000	0.00	0.00	0.00		
29-3 & 29-12	Ranges	1465		6,000	0.00	0.00	0.00		
29-3 & 29-12	Refrigerators	1465		4,000	0.00	0.00	0.00		
29-3	Remodel Apt. J-2	1460		0.00	0.00	0.00	0.00		
29-3	Windows & Shades	1460		0.00	89,759.95	89,759.95	89,759.95	Complete	
29-3	Plumbing	1460		0.00	2,707.72	2,707.72	2,707.72	Complete	
29-3	Locks	1460		0.00	6,658.92	6,658.92	6,658.92	Complete	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Actual Modernization Cost Certificate

U.S. Department of Housing
and Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577-0157 (exp. 12/31/2011)

Comprehensive Improvement Assistance Program (CIAP)
Comprehensive Grant Program (CGP)

Public reporting burden for this collection of information is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Reports Management Officer, Paperwork Reduction Project (2577-0044 and 0157), Office of Information Technology, U.S. Department of Housing and Urban Development, Washington, D.C. 20410-3600. This agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless that collection displays a valid OMB control number.

Do not send this form to the above address.

This collection of information requires that each Housing Authority (HA) submit information to enable HUD to initiate the fiscal closeout process. The information will be used by HUD to determine whether the modernization grant is ready to be audited and closed out. The information is essential for audit verification and fiscal close out. Responses to the collection are required by regulation. The information requested does not lend itself to confidentiality.

HA Name:

Housing Authority of Hartsville

Modernization Project Number:

SC16P02950110

The HA hereby certifies to the Department of Housing and Urban Development as follows:

1. That the total amount of Modernization Cost (herein called the "Actual Modernization Cost") of the Modernization Grant, is as shown below:

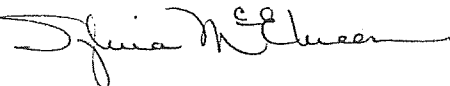
A. Original Funds Approved	\$	174,782.00
B. Funds Disbursed	\$	174,782.00
C. Funds Expended (Actual Modernization Cost)	\$	174,782.00
D. Amount to be Recaptured (A-C)	\$	
E. Excess of Funds Disbursed (B-C)	\$	

- That all modernization work in connection with the Modernization Grant has been completed;
- That the entire Actual Modernization Cost or liabilities therefor incurred by the HA have been fully paid;
- That there are no undischarged mechanics', laborers', contractors', or material-men's liens against such modernization work on file in any public office where the same should be filed in order to be valid against such modernization work; and
- That the time in which such liens could be filed has expired.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Signature of Executive Director & Date:

X  06/20/2011

For HUD Use Only

The Cost Certificate is approved for audit:

Approved for Audit (Director, Office of Public Housing / ONAP Administrator)

Eric A. Bickley
Director
Public Housing Program Center

Date:

8/1/11

The audited costs agree with the costs shown above:

Verified: (Designated HUD Official)

Date:

Approved: (Director, Office of Public Housing / ONAP Administrator)

Date:

X

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 3/31/2014

Part I: Summary		PHA Name: Housing Authority of Hartsville		Grant Type and Number Capital Fund Program Grant No: SC16P029501-11 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: 2011 FFY of Grant Approval:	
Type of Grant		<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)	
Summary by Development Account		Summary by Development Account		Total Estimated Cost		Total Actual Cost¹	
Line		Original	Revised²	Obligated	Expended		
1	Total non-CFP Funds						
2	1406 Operations (may not exceed 20% of line 21) ³	148,195					
3	1408 Management Improvements						
4	1410 Administration (may not exceed 10% of line 21)						
5	1411 Audit						
6	1415 Liquidated Damages						
7	1430 Fees and Costs						
8	1440 Site Acquisition						
9	1450 Site Improvement						
10	1460 Dwelling Structures						
11	1465.1 Dwelling Equipment—Nonexpendable						
12	1470 Non-dwelling Structures						
13	1475 Non-dwelling Equipment						
14	1485 Demolition						
15	1492 Moving to Work Demonstration						
16	1495.1 Relocation Costs						
17	1499 Development Activities ⁴						

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary		FFY of Grant: 2011	
PHA Name: Housing Authority of Hartsville	Grant Type and Number Capital Fund Program Grant No: SC16P029501-11 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant Approval:	
Type of Grant	<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:		
	<input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost¹
		Original	Revised² Obligated Expended
18a	1501 Collateralization or Debt Service paid by the PHA		
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment		
19	1502 Contingency (may not exceed 8% of line 20)		
20	Amount of Annual Grant:: (sum of lines 2 - 19)	148,195	
21	Amount of line 20 Related to LBP Activities		
22	Amount of line 20 Related to Section 504 Activities		
23	Amount of line 20 Related to Security - Soft Costs		
24	Amount of line 20 Related to Security - Hard Costs		
25	Amount of line 20 Related to Energy Conservation Measures		
Signature of Executive Director		Date 08/01/2011	Signature of Public Housing Director
			Date

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RHF funds shall be included here.

PHA Name: Housing Authority of Hartsville

Grant Type and Number
Capital Fund Program Grant No: SC16P029501-11
CFFP (Yes/ No):
Replacement Housing Factor Grant No:

Federal FFY of Grant: 2011

[illegible]

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
² To be completed for the Performance and Evaluation Report.

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

PHA Name: Housing Authority of Hartsville

Federal FFY of Grant: 2011

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

ATTACHMENT TO FORM 990

[illegible]

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011

Part I: Summary

PHA Name/Number SC029		Hartsville, Darlington, South Carolina		<input checked="" type="checkbox"/> Original 5-Year Plan	<input type="checkbox"/> Revision No:
Development Number and Name	Work Statement for Year 1 FFY 2011	Work Statement for Year 2 FFY 2012	Work Statement for Year 3 FFY 2013	Work Statement for Year 4 FFY 2014	Work Statement for Year 5 FFY 2015
A.					
B. Physical Improvements Subtotal	Annual Statement	276,262	265,594	169,000	150,000
C. Management Improvements		20,000	40,000	20,000	
D. PHA-Wide Non-dwelling Structures and Equipment				206,000	28,980
E. Administration		10,000	20,000	20,000	21,020
F. Other		20,162	41,594	35,536	
G. Operations		20,000	40,000	40,000	
H. Demolition					
I. Development					
J. Capital Fund Financing – Debt Service					
K. Total CFP Funds		346,424	407,188	490,536	200,000
L. Total Non-CFP Funds					
M. Grand Total		346,424	407,188	490,536	200,000

**U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2001**

PHA Name/Number Housing Authority of
Hartsville SC029

☒ Original 5-Year Plan ☐ Revision No:

Work Statement for Year 5
FFY

[illegible]

**U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2001**

Work Statement for Year 1 FFY <u>2011</u>	Work Statement for Year <u>2012</u> FFY		Work Statement for Year: 2012 FFY			
	Development Number/Name SC029-003 Southpark General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name SC029-12 Eastpark General Description of Major Work Categories	Quantity	Estimated Cost
See Annual Statement	Routine Operations		20,000	Backfill/Topsoil		7,342
	Mgmt. Improvements		20,000	Roofs		47,700
	Administration		10,000	Vinyl Floors		4,244
	Audit		675	Bath tub Encl.		45,699
	A & E Fees		19,487	Gas Furnaces		10,903
	Backfill/Topsoil		7,400	Ranges		1,226
	Windows		45,600	Refrigerators		2,126
	Kitchen Cabinets/Sinks		11,994			
	Range Hoods		5,790			
	Roofs		30,130			
	Vinyl Floors		10,979			
	Int. Wood Doors		10,158			
	Ext. Metal Doors		10,554			
	Bath tub Encl.		10,376			
	Gas Furnaces		7,706			
	Ranges		3,649			
Refrigerators		2,686				
	Subtotal of Estimated Cost	\$227,184		Subtotal of Estimated Cost	\$ 119,240	

**U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2001**

Work Statement for Statement for	Work Statement for Year <u>2013</u> FFY	Work Statement for Year: <u>2013</u> FFY
-------------------------------------	--	---

Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/20011

Part III: Supporting Pages – Management Needs Work Statement(s)

Work Statement for Year 1 FFY 2011	Work Statement for Year 2014 FFY		Work Statement for Year: 2014 FFY	
	Development Number/Name SC029-003 Southpark General Description of Major Work Categories	Estimated Cost	Development Number/Name SC029-12 Eastpark General Description of Major Work Categories	Estimated Cost
See Annual Statement	Dryer Hook Ups	5,000	Dryer Hook Ups	5,000
	Roofs	45,000	Window Shades	30,000
	Ranges	10,000	Ranges	10,000
	Refrigerators	10,000	Refrigerators	10,000
	Gas Furnaces	42,000	Gas Furnace	42,000
	Water Heaters	7,000	Water Heaters	9,000
	Vinyl Floors	50,000	Vinyl Floors	50,000
	Int. Wood Doors	2,000	Int. Wood Doors	2,000
	Ext. Metal Doors	12,500	Ext. Metal Doors	12,500
	Routine Operations	40,000	Backfill/Topsoil	12,000
	Mgmt. Improvements	20,000		
	Administration	20,000		
	Audit	1,200		
	A & E Fees	34,336		
	Backfill/Topsoil	9,000		
	Ranges			
	Refrigerators			
Subtotal of Estimated Cost		\$308,036	Subtotal of Estimated Cost	\$182,500

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2001

Work Statement for Year 2015
FFY

Subtotal of Estimated Cost	\$
----------------------------	----


DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352

(See reverse for public burden disclosure.)

Approved by OMB

0348-0046

1. Type of Federal Action: <input type="checkbox"/> a. contract <input checked="" type="checkbox"/> b. grant c. cooperative agreement d. loan e. loan guarantee f. loan insurance		2. Status of Federal Action: <input type="checkbox"/> A a. bid/offer/application b. initial award c. post-award		3. Report Type: <input type="checkbox"/> A a. initial filing b. material change For Material Change Only: year _____ quarter _____ date of last report _____	
4. Name and Address of Reporting Entity: <input checked="" type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known: Congressional District, if known: 4c			5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime: N/A Congressional District, if known:		
6. Federal Department/Agency: Housing Authority of Hartsville, SC			7. Federal Program Name/Description: Capital Fund Program CFDA Number, if applicable: _____		
8. Federal Action Number, if known: N/A			9. Award Amount, if known: \$		
10. a. Name and Address of Lobbying Registrant (if individual, last name, first name, MI): N/A			b. Individuals Performing Services (including address if different from No. 10a) (last name, first name, MI): N/A		
11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.			Signature: <u></u> Print Name: <u>Sylvia McElveen</u> Title: <u>Acting Director</u> Telephone No.: <u>843-332-1583</u> Date: <u>09/06/2011</u>		
Federal Use Only:			Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)		

PHA Certifications of Compliance with PHA Plans and Related R e g u l a t i o n s

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 08/30/2011

PHA Certifications of Compliance with the PHA Plans and Related Regulations: Board Resolution to Accompany the PHA 5-Year and Annual PHA Plan

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the ___ 5-Year and/or X Annual PHA Plan for the PHA fiscal year beginning 10,2011, hereinafter referred to as "the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.
2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.
3. The PHA certifies that there has been no change, significant or otherwise, to the Capital Fund Program (and Capital Fund Program/Replacement Housing Factor) Annual Statement(s), since submission of its last approved Annual Plan. The Capital Fund Program Annual Statement/Annual Statement/Performance and Evaluation Report must be submitted annually even if there is no change.
4. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
5. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
6. The PHA certifies that it will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.
7. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.
8. For PHA Plan that includes a policy for site based waiting lists:
 - The PHA regularly submits required data to HUD's 50058 PIC/IMS Module in an accurate, complete and timely manner (as specified in PIH Notice 2006-24);
 - The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
 - Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;
 - The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;
 - The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).
9. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
10. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.
11. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.
12. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.

13. The PHA will take appropriate affirmative action to award contracts to minority and women's business enterprises under 24 CFR 5.105(a).
14. The PHA will provide the responsible entity or HUD any documentation that the responsible entity or HUD needs to carry out its review under the National Environmental Policy Act and other related authorities in accordance with 24 CFR Part 58 or Part 50, respectively.
15. With respect to public housing the PHA will comply with Davis-Bacon or HUD determined wage rate requirements under Section 12 of the United States Housing Act of 1937 and the Contract Work Hours and Safety Standards Act.
16. The PHA will keep records in accordance with 24 CFR 85.20 and facilitate an effective audit to determine compliance with program requirements.
17. The PHA will comply with the Lead-Based Paint Poisoning Prevention Act, the Residential Lead-Based Paint Hazard Reduction Act of 1992, and 24 CFR Part 35.
18. The PHA will comply with the policies, guidelines, and requirements of OMB Circular No. A-87 (Cost Principles for State, Local and Indian Tribal Governments), 2 CFR Part 225, and 24 CFR Part 85 (Administrative Requirements for Grants and Cooperative Agreements to State, Local and Federally Recognized Indian Tribal Governments).
19. The PHA will undertake only activities and programs covered by the Plan in a manner consistent with its Plan and will utilize covered grant funds only for activities that are approvable under the regulations and included in its Plan.
20. All attachments to the Plan have been and will continue to be available at all times and all locations that the PHA Plan is available for public inspection. All required supporting documents have been made available for public inspection along with the Plan and additional requirements at the primary business office of the PHA and at all other times and locations identified by the PHA in its PHA Plan and will continue to be made available at least at the primary business office of the PHA.
21. The PHA provides assurance as part of this certification that:
 - (i) The Resident Advisory Board had an opportunity to review and comment on the changes to the policies and programs before implementation by the PHA;
 - (ii) The changes were duly approved by the PHA Board of Directors (or similar governing body); and
 - (iii) The revised policies and programs are available for review and inspection, at the principal office of the PHA during normal business hours.
22. The PHA certifies that it is in compliance with all applicable Federal statutory and regulatory requirements.

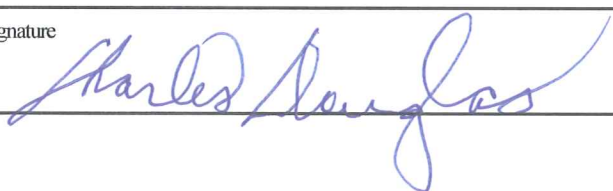
Housing Authority of Hartsville
 PHA Name

SC029
 PHA Number/HA Code

5-Year PHA Plan for Fiscal Years 2011- 2015

X Annual PHA Plan for Fiscal Years 2011- 2012

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. **Warning:** HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official	Title
Charles Douglas	Chairman, Board of Commissioners
Signature	Date
	9-5-2011

Certification for a Drug-Free Workplace

U.S. Department of Housing
and Urban Development

Applicant Name

Housing Authority of Hartsville

Program/Activity Receiving Federal Grant Funding

Capital Fund Program

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:

a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.

b. Establishing an on-going drug-free awareness program to inform employees ---

(1) The dangers of drug abuse in the workplace;

(2) The Applicant's policy of maintaining a drug-free workplace;

(3) Any available drug counseling, rehabilitation, and employee assistance programs; and

(4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.

c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.;

d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will ---

(1) Abide by the terms of the statement; and

(2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federalagency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted ---

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

g. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs a. thru f.

2. Sites for Work Performance. The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)

Check here ☐ if there are workplaces on file that are not identified on the attached sheets.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.

(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official

Charles Douglas

Title

Chairman, Board of Commissioners

Signature

Date

X

form HUD-50070 (3/98)

ref. Handbooks 7417.1, 7475.13, 7485.1 & .3

Certification of Payments to Influence Federal Transactions

U.S. Department of Housing
and Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 01/31/2014)

Applicant Name

Housing Authority of Hartsville

Program/Activity Receiving Federal Grant Funding

Capital Fund Program

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying, in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all sub recipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.
Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official

Sylvia McElveen

Title

Acting Director

Signature



Date (mm/dd/yyyy)

09/06/2011

Civil Rights Certification

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 08/30/2011

Civil Rights Certification**Annual Certification and Board Resolution**

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioner, I approve the submission of the Plan for the PHA of which this document is a part and make the following certification and agreement with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

The PHA certifies that it will carry out the public housing program of the agency in conformity with title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990, and will affirmatively further fair housing.

Housing Authority of Hartsville
PHA Name

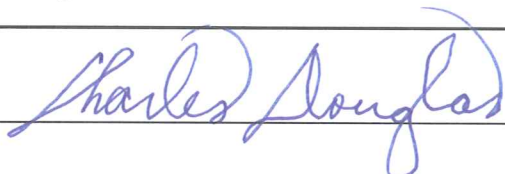
SC029
PHA Number/HA Code

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official
Charles Douglas

Title Chairman, Board of Commissioners

Signature



Date

9-6-2011

form HUD-50077-CR (1/2009)

OMB Approval No. 2577-0226

Certification by State or Local
Official of PHA Plans Consistency
with the Consolidated Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB# 2577-0226
Expires 08/30/2011

**Certification by State or Local Official of PHA Plans Consistency with the
Consolidated Plan**

I, C.M. PENNINGTON, IV the MAYOR, CITY OF HARTSVILLE certify that the ~~Five Year~~ and
Annual PHA Plan of the Housing Authority of Hartsville is consistent with the Consolidated Plan of
the City of Hartsville, SC prepared pursuant to 24 CFR Part 91.



Signed / Dated by Appropriate State or Local Official

Certification by State or Local
Official of PHA Plans Consistency
with the Consolidated Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB# 2577-0226
Expires 08/30/2011

**Certification by State or Local Official of PHA Plans Consistency with the
Consolidated Plan**

I, J.A. Mathews the Spec. Proj. Director certify that the ~~Five Year~~ and
Annual PHA Plan of the Housing Authority of Hartsville is consistent with the Consolidated Plan of
the City of Hartsville, SC prepared pursuant to 24 CFR Part 91.



Signed / Dated by Appropriate State or Local Official

A Public Hearing will be held at the Housing Authority of Hartsville on Monday, August 29, 2011 at 2:00pm. This hearing will be the time to receive any public comments on the Housing Authority Annual Plan.

The Housing Authority provides **Equal Opportunity Housing** for families needing rental assistance.

NOTICE TO CREDITORS

STATE OF SOUTH CAROLINA
COUNTY OF DARLINGTON
PROBATE COURT
In the matter of JACQUELYN JOHNSON WILKES
Case Number: 2011-ES-16-217

NOTICE TO CREDITORS OF ESTATES

All persons having claims against the following estates are required to deliver or mail their claims to the indicated Personal Representatives, appointed to administer these estates, and to file their claims on Form #371PC with the Probate Court of Darlington County, the address of which is Darlington County Courthouse, 1 Public Square, Room 208, Darlington, SC 29532 on or before the date that is eight months after the date of the first publication of this

Notice to Creditors (unless barred by operation of Section 62-3-803), or such persons shall be forever barred as to their claims. All claims are required to be presented in written statements, indicating the name and the address of the claimant, the basis of the claim, the amount claimed, the date when the claim will become due, the nature of any uncertainty as to the amount claimed and the date when due, and a description of any security as to the claim.

Estate: JACQUELYN JOHNSON WILKES
Personal Representative: LINDA W GEE AND DONNA W ATKINSON
Address: 4013 MCGREGOR DRIVE, COLUMBIA, SC 29206/106 W TATUM AVENUE, MCCOLL, SC 29570
Attorney, if applicable:
Address:
(6/1, 6/8, 6/15/2011)

LEGAL NOTICES

The Housing Authority of Hartsville, South Carolina has prepared for public review and comments Annual Plan Up-date. These documents are posted and available for review from 07/25/11 to 09/07/11 at the Housing Authority's Office located at 1301 South 5th Street. A public hearing will be held at the Housing Authority's office on 08/11/11 at 5:00 pm to receive any public comments on these documents. The Housing Authority provides **Equal Opportunity Housing** for families needing rental assistant.
(7/15/11)

LEGAL NOTICES

51490.F36132
NOTICE OF SPECIAL REFEREE SALE
CIVIL ACTION NO. 2011-CP-16-0056

BY VIRTUE OF A DECREE of the Court of Common Pleas for Darlington County, South Carolina, heretofore issued in the case of Beal Bank, S.S.B., against Ernestine P. Reuben, et al., the Special Referee for Darlington County, or his agent, will sell on **August 2, 2011, at 12:30 P.M.**, at Darlington County Courthouse, One Public Square, Darlington, SC, to the highest bidder:

All that certain lot or parcel of land situate, lying and being in the City and County of Darlington, State of South Carolina, designated as Lot No. 3 on plat of the lands of Elizabeth James Darrott made by J.W. Coggeshall

LEGAL NOTICES

STATE OF SOUTH CAROLINA
COUNTY OF DARLINGTON
IN THE FAMILY COURT
FOR THE
FOURTH JUDICIAL CIRCUIT
JOSEPH HAUBNER
PLAINTIFF,
VERSUS
CAROLYN HAUBNER
DEFENDANT.

Case No.: 11-DR-16-486

SUMMONS

TO THE DEFENDANT CAROLYN HAUBNER
ABOVE NAMED:

YOU ARE HEREBY SUMMONED and required to answer the Complaint in the above-entitled action, a copy of which is hereby served upon you, and to serve a copy of your Answer to the said Complaint upon the subscriber at his office at 323 West Home Avenue, Hartsville, South Carolina, within thirty (30) days from the date of service, exclusive of the date of such service, and if you fail to answer the Complaint within the time aforesaid, the Plaintiff herein will apply to the Court for the relief demanded in the said Complaint, and a default judgment will be rendered against any Defendant failing to answer for the relief sought in the Complaint.

ATTORNEY FOR THE PLAINTIFF

By: David H. Moyd

DRIGGERS & MOYD
ATTORNEYS AT LAW
323 WEST HOME AVENUE
POST OFFICE BOX 1439
HARTSVILLE, SOUTH CAROLINA
29551
TELEPHONE 843-332-5151
FAX 843-383-6150

STATE OF SOUTH CAROLINA
COUNTY OF DARLINGTON
FOR THE
FOURTH JUDICIAL CIRCUIT
JOSEPH HAUBNER
PLAINTIFF,
VERSUS
CAROLYN HAUBNER
DEFENDANT.

Case No.: 11-DR-16-486

COMPLAINT

Plaintiff complaining of the Defendant would respectfully show unto this Court that:

1. Plaintiff and Defendant are both citizens and residents of the County of Darlington, State of South Carolina, and have resided therein for at least three (3) months prior to the commencement of this action.

2. Plaintiff and Defendant were married to each other on or about September 2, 1994, in the County of Shelby, State of Tennessee.

3. Plaintiff and Defendant last resided together as husband and wife at 431 Haven Drive, in the city of Hartsville, County of Darlington, State of South Carolina, and have lived separate and apart since May 17, 2011.

4. The following children have been born of this marriage, to-wit: Ryan Joseph Haubner, who was born on September 16, 2003 and Emily Grace Haubner who was born on June 30, 2005.

5. The Defendant has consumed alcoholic beverages to such an extent that the Plaintiff is informed and believes the Defendant has been and is an habitual drunkard. Plaintiff is informed and believes that this Court should grant the Plaintiff a divorce, a vinculo matrimonii, upon the statutory grounds of Habitual Drunkenness.

STATE OF SOUTH CAROLINA
COUNTY OF DARLINGTON
IN THE COURT OF COMMON PLEAS
C/A NO.: 2010-CP-16-537

US Bank NA ND,
Plaintiff,
vs.

Jerri C. Page, individually and as Personal Representative of the Estate of Edward Cook; Terry L. Cook, Sr., and any other Heirs-at-Law or Devisees of Edward Cook, Deceased, their heirs, Personal Representatives, Administrators, Successors and Assigns, and all other persons entitled to claim through them; all unknown persons with any right, title or interest in the real estate described herein; also any persons who may be in the military service of the United States of America, being a class designated as John Doe; and any unknown minors or persons under a disability being a class designated as Richard Roe; The United States of America, acting by and through its agency, The United States Department of Agriculture-Farmers Home Administration n/k/a Rural Development; and South Carolina Department of Health and Human Services,
Defendant(s).
(910.100098)

SUMMONS AND NOTICES

To the Defendants any persons who may be in the military service of the United States of America, being a class designated as John Doe; and any unknown minors or persons under a disability being a class designated as Richard Roe:

YOU ARE HEREBY SUMMONED and required to appear and defend by answering the Complaint in this action, of which a copy is herewith served upon you, and to serve a copy of your Answer on the subscribers at their offices, 1301 Gervais St. Ste. 500 (29201), Post Office Box 12125, within thirty (30) days after the service hereof, exclusive of the day of such service; except that the United States of America, if named, shall have sixty (60) days to answer after the service hereof, exclusive of the day of such service; and if you fail to do so, judgment by default will be rendered against you for the relief demanded in the complaint.

TO MINOR(S) OVER FOURTEEN YEARS OF AGE, AND/OR TO MINOR(S) UNDER FOURTEEN YEARS OF AGE AND THE PERSON WITH WHOM THE MINOR(S) RESIDES, AND/OR TO PERSONS UNDER SOME LEGAL DISABILITY:

YOU ARE FURTHER SUMMONED AND NOTIFIED to apply for the appointment of a guardian ad litem within thirty (30) days after the service of this Summons and Notice upon you. If you fail to do so, application for such appointment will be made by the Plaintiff.

YOU WILL ALSO TAKE NOTICE that under the provisions of South Carolina Code §29-3-100, effective June 16, 1993, any collateral assignment of rents contained in the attached mortgage is perfected and Plaintiff hereby gives notice that all rents shall be payable directly to it by delivery to its undersigned attorneys from the date of default. In the alternative, Plaintiff will move before a judge of this Circuit on the 10th day after service hereof, or as soon thereafter as counsel may be heard, for an Order enforcing the assignment of rents, if any, and compelling payment of all rents covered by such assignment directly to the Plaintiff, which motion is to be based upon the original note and mortgage and the Complaint attached hereto.

Pearce W. Fleming, S.C. Bar No. 2038
D. Randolph Whitt, S.C. Bar No. 13068
FLEMING & WHITT, P. A.
1301 Gervais Street, Suite 500

RESIDENT ADVISORY MEETING LOG - IN SHEET FOR AUGUST 1, 2011 AT 5:30PM

[illegible]

Resident Advisory Board Meeting

August 01, 2011

Attendees:

Charmaine Jenkins

Lakeisha Buard

Anna Hawkins

Delephine Rogers

Kenyatta Hadley

Tara Toney

Tomika Berry - PH Occupancy Specialist

Sylvia McElveen - Acting Director

The Resident Advisory Board members and two of the Housing Authority staff met on Monday August 01, 2011 at 5:00 pm in the Housing Authority Community Room.

The intent of the meeting was to address concerns and the future of the the Southpark and Eastpark complexes.

Ms. Rogers expressed the need for play ground equipment. She stated that the children needed an area to play in. Ms. Rogers stated that she has observed illegal dumping of trash.

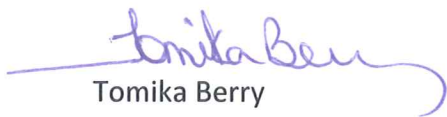
Ms. Buard stated she would like for parenting classes to be held. Plus any other classes that would benefit the residents.

Both Ms. Hadley and Ms. Toney expressed their concern for the bus stop at the Eastpark complex. Their main concern was the safety of the children. Also, it was felt that a shelter was needed for the children during extreme cold or hot weather.

No definite answers could be provided considering the current financial status of the Authority in regards to areas that would require funding. All of the concerns were noted and will be addressed as soon as finances will allow.

The Authority staff will look into setting up classes that the residents may consider useful and beneficial. We are also looking into setting up a Neighbor Crime Watch for each complex.

With regards,



Tomika Berry

Resident Advisory Board Chairperson

LOG - IN SHEET FOR RESIDENT ADVISORY CALL MEETING 9/28/2011 @ 5:30PM

[illegible]

My personal feelings is I think you all are doing a great job. Even though ~~everyone~~ you all have to deal with many people ~~at~~ in the run of a day you all still treat us as individuals. I think that even though it may take some time to get everything on track, but as long as we have these meetings great things will happen.

Lakeisha Beard

9-28-11

I think Housing Authority is alot better now. whenever there's a problem all you have to do is call Mo Berry and shes on the site with no problem. It doesn't take long for the work order to be filled.

I've notice the police all getting more involved. It's cleaner and ~~the~~ I'm just pleased with the changes that have been made.

Charmaine Jaku

I think housing is doing a good job and we need to get all the resident together and make it right.

Thank you
Doretha Brunson